

Fill in this information to identify your case:

United States Bankruptcy Court for the:

DISTRICT OF NEW JERSEY

Case number (if known) Chapter 7

☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Deli King of Linden, LLC

2. All other names debtor used in the last 8 years
Include any assumed names, trade names and doing business as names

3. Debtor's federal Employer Identification Number (EIN) 27-0824034

4. Debtor's address	Principal place of business	Mailing address, if different from principal place of business
	628 W. St. Georges Ave. Linden, NJ 07036 Number, Street, City, State & ZIP Code	P.O. Box, Number, Street, City, State & ZIP Code
	Union County	Location of principal assets, if different from principal place of business Number, Street, City, State & ZIP Code

5. Debtor's website (URL)

6. Type of debtor
☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))
☐ Partnership (excluding LLP)
☐ Other. Specify:

Debtor Deli King of Linden, LLC
Name

Case number (if known) _____

7. Describe debtor's business

A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

B. Check all that apply

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.
See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.7223**8. Under which chapter of the Bankruptcy Code is the debtor filing?**

Check one:

☒ Chapter 7☐ Chapter 9☐ Chapter 11. Check all that apply:

- ☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).
- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**☒ No.☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?☐ No☒ Yes.

List all cases. If more than 1, attach a separate list

Debtor	<u>See Attachment</u>	Relationship	_____
District	_____	When	_____
		Case number, if known	_____

Debtor Deli King of Linden, LLC
Name

Case number (if known) _____

11. Why is the case filed in this district?

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

☒ No

☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard? _____

☐ It needs to be physically secured or protected from the weather.

☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

☐ Other _____

Where is the property? _____

Number, Street, City, State & ZIP Code

Is the property insured?

☐ No

☐ Yes. Insurance agency _____

Contact name _____

Phone _____

Statistical and administrative information

13. Debtor's estimation of available funds

Check one:

☐ Funds will be available for distribution to unsecured creditors.

☒ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors

☐ 1-49

☒ 50-99

☐ 100-199

☐ 200-999

☐ 1,000-5,000

☐ 5001-10,000

☐ 10,001-25,000

☐ 25,001-50,000

☐ 50,001-100,000

☐ More than 100,000

15. Estimated Assets

☐ \$0 - \$50,000

☐ \$50,001 - \$100,000

☒ \$100,001 - \$500,000

☐ \$500,001 - \$1 million

☐ \$1,000,001 - \$10 million

☐ \$10,000,001 - \$50 million

☐ \$50,000,001 - \$100 million

☐ \$100,000,001 - \$500 million

☐ \$500,000,001 - \$1 billion

☐ \$1,000,000,001 - \$10 billion

☐ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

16. Estimated liabilities

☐ \$0 - \$50,000

☐ \$50,001 - \$100,000

☒ \$100,001 - \$500,000

☐ \$500,001 - \$1 million

☐ \$1,000,001 - \$10 million

☐ \$10,000,001 - \$50 million

☐ \$50,000,001 - \$100 million

☐ \$100,000,001 - \$500 million

☐ \$500,000,001 - \$1 billion

☐ \$1,000,000,001 - \$10 billion

☐ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

Debtor Deli King of Linden, LLC
Name

Case number (if known) _____

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature
of authorized
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on January 7, 2019
MM / DD / YYYY

X /s/ Edward Levy
Signature of authorized representative of debtor

Edward Levy
Printed name

Title Managing Member

18. Signature of attorney

X /s/ Leonard C. Walczyk
Signature of attorney for debtor

Date January 7, 2019
MM / DD / YYYY

Leonard C. Walczyk
Printed name

WASSERMAN, JURISTA & STOLZ, P.C.
Firm name

110 Allen Road
Suite 304
Basking Ridge, NJ 07920
Number, Street, City, State & ZIP Code

Contact phone (973) 467-2700 Email address attys@wjslaw.com

032991989 NJ
Bar number and State

Debtor Deli King of Linden, LLC Case number (if known) _____
Name

Fill in this information to identify your case:

United States Bankruptcy Court for the:

DISTRICT OF NEW JERSEY

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FORM 201. VOLUNTARY PETITION

Pending Bankruptcy Cases Attachment

Debtor	<u>Eddie Levy Signature Creations, Inc.</u>	Relationship to you	<u>Affiliate</u>
District	<u>Newark</u>	When	<u>1/07/19</u>
		Case number, if known	_____
Debtor	<u>NJB Caterers, LLC</u>	Relationship to you	<u>Affiliate</u>
District	<u>Newark</u>	When	<u>1/07/19</u>
		Case number, if known	_____

IN THE UNITED STATES BANKRUPTCY COURT

In the Matter of:

Deli King of Linden, LLC,

Debtor

}
} Case No.
} Chapter 7
}
}

STATEMENT REGARDING AUTHORITY TO SIGN AND FILE PETITION

I, EDWARD LEVY, declare under penalty of perjury that I am the Managing Member of Deli King of Linden, LLC, and that the following is a true and correct copy of the resolutions adopted by the Board of Directors of said Limited Liability Company at a special meeting duly called and held on the 7th day of January 2019.

"Whereas, it is in the best interest of this Limited Liability Company to file a voluntary petition in the United States Bankruptcy Court pursuant to Chapter 7 of Title 11 of the United States Code;

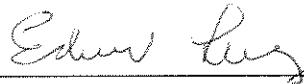
Be It Therefore Resolved, that EDWARD LEVY, Managing Member of this Limited Liability Company, is authorized and directed to execute and deliver all documents necessary to perfect the filing of a chapter 7 voluntary bankruptcy case on behalf of the Limited Liability Company; and

Be It Further Resolved, that EDWARD LEVY, Managing Member of this Limited Liability Company is authorized and directed to appear in all bankruptcy proceedings on behalf of the Limited Liability Company, and to otherwise do and perform all acts and deeds and to execute and deliver all necessary documents on behalf of the Limited Liability Company in connection with such bankruptcy case, and

Be It Further Resolved, that EDWARD LEVY, Managing Member of this Limited Liability Company is authorized and directed to employ Leonard C. Walczyk, attorney and the law firm of WASSERMAN, JURISTA & STOLZ to represent the Limited Liability Company in such bankruptcy case."

Date: January 7, 2019

Signed: _____



EDWARD LEVY

Resolution of Members
of
Deli King of Linden, LLC

Whereas, it is in the best interest of this Limited Liability Company to file a voluntary petition in the United States Bankruptcy Court pursuant to Chapter 7 of Title 11 of the United States Code;

Be It Therefore Resolved, that EDWARD LEVY, Managing Member of this Limited Liability Company, is authorized and directed to execute and deliver all documents necessary to perfect the filing of a chapter 7 voluntary bankruptcy case on behalf of the Limited Liability Company; and

Be It Further Resolved, that EDWARD LEVY, Managing Member of this Limited Liability Company is authorized and directed to appear in all bankruptcy proceedings on behalf of the Limited Liability Company, and to otherwise do and perform all acts and deeds and to execute and deliver all necessary documents on behalf of the Limited Liability Company in connection with such bankruptcy case, and

Be It Further Resolved, that EDWARD LEVY, Managing Member of this Limited Liability Company is authorized and directed to employ Leonard C. Walczyk, attorney and the law firm of WASSERMAN, JURISTA & STOLZ to represent the Limited Liability Company in such bankruptcy case.

Date: January 7, 2019

Signed: Edward Levy
EDWARD LEVY

Fill in this information to identify the case:

Debtor name Deli King of Linden, LLC

United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on January 7, 2019

X /s/ Edward Levy

Signature of individual signing on behalf of debtor

Edward Levy

Printed name

Managing Member

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name Deli King of Linden, LLC

United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. Real property:	
Copy line 88 from <i>Schedule A/B</i>	\$ 0.00
1b. Total personal property:	
Copy line 91A from <i>Schedule A/B</i>	\$ 140,924.15
1c. Total of all property:	
Copy line 92 from <i>Schedule A/B</i>	\$ 140,924.15

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)	
Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i>	\$ 218,000.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)	
3a. Total claim amounts of priority unsecured claims:	
Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i>	\$ 86,434.44
3b. Total amount of claims of nonpriority amount of unsecured claims:	
Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i>	+\$ 154,708.42
4. Total liabilities	
Lines 2 + 3a + 3b	\$ 459,142.86

Fill in this information to identify the case:Debtor name Deli King of Linden, LLCUnited States Bankruptcy Court for the: DISTRICT OF NEW JERSEY

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor**Current value of debtor's interest****2. Cash on hand**\$100.00**3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. Santander BankChecking1703\$0.003.2. Santander BankChecking1711\$0.003.3. Santander BankChecking2718\$10.003.4. Santander BankChecking2969\$11.66**4. Other cash equivalents (Identify all)****5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$121.66**Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**

Debtor Deli King of Linden, LLC Case number (If known) _____
Name

- ☐ No. Go to Part 3.
☒ Yes Fill in the information below.

7. **Deposits, including security deposits and utility deposits**
Description, including name of holder of deposit

7.1. landlord security deposit \$11,200.00

8. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**
Description, including name of holder of prepayment

9. **Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

\$11,200.00

Part 3: Accounts receivable

10. **Does the debtor have any accounts receivable?**

- ☐ No. Go to Part 4.
☒ Yes Fill in the information below.

11. **Accounts receivable**

11a. 90 days old or less: 17,133.49 - 0.00 = \$17,133.49
face amount doubtful or uncollectible accounts

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$17,133.49

Part 4: Investments

13. **Does the debtor own any investments?**

- ☒ No. Go to Part 5.
☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. **Does the debtor own any inventory (excluding agriculture assets)?**

- ☐ No. Go to Part 6.
☒ Yes Fill in the information below.

	General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19.	Raw materials Raw materials and inventory		\$0.00		\$5,000.00
20.	Work in progress				
21.	Finished goods, including goods held for resale				
22.	Other inventory or supplies				

Debtor Deli King of Linden, LLC Case number (If known) _____
Name

23. **Total of Part 5.**

Add lines 19 through 22. Copy the total to line 84.

\$5,000.00

24. **Is any of the property listed in Part 5 perishable?**

- ☒ No
☐ Yes

25. **Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?**

- ☒ No
☐ Yes. Book value _____ Valuation method _____ Current Value _____

26. **Has any of the property listed in Part 5 been appraised by a professional within the last year?**

- ☒ No
☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. **Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- ☒ No. Go to Part 7.
☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

- ☐ No. Go to Part 8.
☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture assorted office furniture	\$0.00		\$400.00
40.	Office fixtures assorted office fixtures	\$0.00		\$300.00

41. **Office equipment, including all computer equipment and communication systems equipment and software**

42. **Collectibles** Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. **Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

\$700.00

44. **Is a depreciation schedule available for any of the property listed in Part 7?**

- ☒ No
☐ Yes

45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**

- ☒ No
☐ Yes

Part 8: Machinery, equipment, and vehicles

46. **Does the debtor own or lease any machinery, equipment, or vehicles?**

Debtor Deli King of Linden, LLC Case number (If known) _____
Name

- ☐ No. Go to Part 9.
☒ Yes Fill in the information below.

	General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47.	Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
48.	Watercraft, trailers, motors, and related accessories <i>Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels</i>			
49.	Aircraft and accessories			
50.	Other machinery, fixtures, and equipment (excluding farm machinery and equipment) See attached Asset Depreciation Schedule	\$0.00		\$106,769.00

51. **Total of Part 8.** Add lines 47 through 50. Copy the total to line 87. \$106,769.00

52. **Is a depreciation schedule available for any of the property listed in Part 8?**

- ☒ No
☐ Yes

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**

- ☒ No
☐ Yes

Part 9: Real property

54. **Does the debtor own or lease any real property?**

- ☒ No. Go to Part 10.
☐ Yes Fill in the information below.

Part 10: Intangibles and intellectual property

59. **Does the debtor have any interests in intangibles or intellectual property?**

- ☐ No. Go to Part 11.
☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60.	Patents, copyrights, trademarks, and trade secrets			
61.	Internet domain names and websites www.delikinglinden.com	\$0.00		Unknown
62.	Licenses, franchises, and royalties			
63.	Customer lists, mailing lists, or other compilations customer list	\$0.00		Unknown

Debtor Deli King of Linden, LLC Case number (If known) _____
Name

64. **Other intangibles, or intellectual property**

65. **Goodwill**

66. **Total of Part 10.**

Add lines 60 through 65. Copy the total to line 89.

\$0.00

67. **Do your lists or records include personally identifiable information of customers** (as defined in 11 U.S.C. §§ 101(41A) and 107?

☒ No

☐ Yes

68. **Is there an amortization or other similar schedule available for any of the property listed in Part 10?**

☒ No

☐ Yes

69. **Has any of the property listed in Part 10 been appraised by a professional within the last year?**

☒ No

☐ Yes

Part 11: All other assets

70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☒ No. Go to Part 12.

☐ Yes Fill in the information below.

Debtor Deli King of Linden, LLC Case number (If known) _____
Name

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$121.66	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$11,200.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$17,133.49	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$5,000.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$700.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$106,769.00	
88. Real property. <i>Copy line 56, Part 9.....></i>		\$0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$0.00	
91. Total. Add lines 80 through 90 for each column	\$140,924.15	+ 91b. \$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$140,924.15

2017 DEPRECIATION AND AMORTIZATION REPORT

DELL KING OF LINDEN, LLC

SCHEDULE C-1

NO

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
5	ORGANIZATION COSTS	10/01/09	195	60M	HY43	500.				500.	500.		0.	500.
26	DISPLAY	10/25/10	200DE	7.00	HY17	405.		405.		0.			0.	0.
28	EQUIPMENT	08/12/11	200DE	7.00	HY17	1,784.		1,784.		0.			0.	0.
32	EQUIPMENT	02/11/13	200DE	7.00	HY17	1,600.		1,600.		0.			0.	0.
33	EQUIPMENT	06/30/13	200DE	7.00	HY17	14,800.		14,800.		0.			0.	0.
34	NEW STOVE	12/14/14	200DE	7.00	HY17	2,250.		2,250.		0.			0.	0.
35	EQUIPMENT	07/01/14	200DE	7.00	HY17	14,402.		14,402.		0.			0.	0.
81	EQUIPMENT	11/30/16	200DE	7.00	MO17	12,641.				12,641.	451.		3,483.	3,934.
1	EQUIPMENT	11/15/09	200DE	7.00	MO17	484.		0.	242.	242.	242.		0.	242.
2	EQUIPMENT	12/11/09	200DE	7.00	MO17	4,500.		0.	2,250.	2,250.	2,249.		0.	2,249.
3	EQUIPMENT	12/14/09	200DE	7.00	MO17	3,850.		0.	1,925.	1,925.	1,925.		0.	1,925.
4	EQUIPMENT	12/30/09	200DE	7.00	MO17	1,847.		0.	924.	923.	923.		0.	923.
6	USED EQUIPMENT	12/21/09	200DE	7.00	MO17	50,000.				50,000.	45,080.		0.	45,080.
22	COMPUTER	05/25/10	200DE	5.00	HY17	1,173.		1,173.		0.			0.	0.
23	EQUIPMENT	05/31/10	200DE	7.00	HY17	1,793.		1,793.		0.			0.	0.
24	EQUIPMENT	06/21/10	200DE	7.00	HY17	1,163.		1,163.		0.			0.	0.
25	EQUIPMENT	07/13/10	200DE	7.00	HY17	1,524.		1,524.		0.			0.	0.
27	EQUIPMENT	01/19/10	200DE	7.00	HY17	1,355.		1,355.		0.			0.	0.

728111 04-01-17

8.1

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zor

Page 7 Depreciation Schedule

2017 DEPRECIATION AND AMORTIZATION REPORT

DELLI KING OF LINDEN, LLC

SCHEDULE C - 1

N2

Asset No.	Description	Date Acquired	Method	Life	Convention	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
29	EQUIPMENT	09/21/12	200DB	7.00	H	17	1,575.		1,575.		0.			0.	0.
30	EQUIPMENT	11/13/12	200DB	7.00	H	17	1,225.		1,225.		0.			0.	0.
31	EQUIPMENT	12/13/12	200DB	7.00	H	17	2,950.		2,950.		0.			0.	0.
46	EQUIPMENT	06/30/15	200DB	7.00	H	17	39,742.		25,000.		14,742.	5,717.		2,578.	8,295.
58	STOVE	12/13/16	200DB	7.00	M	17	4,950.				4,950.	177.		1,364.	1,541.
93	ICE MACHINE	01/10/17	200DB	7.00	H	19C	2,935.		2,935.		0.		2,935.	2,935.	0.
94	OVEN	01/13/17	200DB	7.00	H	19C	19,764.		16,490.		3,274.		16,490.	16,958.	468.
95	EQUIPMENT	03/31/17	200DB	7.00	H	19C	18,322.				18,322.			2,618.	2,618.
	* GRAND TOTAL SCH C DEPR. & AMORT.						207,534.		92,424.	5,341.	109,769.	57,264.	19,425.	29,936.	67,773.

728111 04-01-17

8.2

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Z

7-2

Fill in this information to identify the case:

Debtor name Deli King of Linden, LLC

United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
2.1	Crown Funding Group/Silver Line <small>Creditor's Name</small> 253 36th St., Suite B317 Brooklyn, NY 11232 <small>Creditor's mailing address</small> <small>Creditor's email address, if known</small> Date debt was incurred Last 4 digits of account number Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien Describe the lien Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$165,000.00	\$0.00

2.2	CT Corporation System, as Representative <small>Creditor's Name</small> 330 N. Brand Blvd., Suite 700 Attn: SPRS Glendale, CA 91203 <small>Creditor's mailing address</small> <small>Creditor's email address, if known</small> Date debt was incurred Last 4 digits of account number Do multiple creditors have an interest in the same property?	Describe debtor's property that is subject to a lien all assets of the Debtor Describe the lien UCC Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply	\$0.00	Unknown
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Debtor Deli King of Linden, LLC Case number (if know) _____
Name

- ☒ No
☐ Yes. Specify each creditor, including this creditor and its relative priority.
- ☐ Contingent
☐ Unliquidated
☐ Disputed

2.3 Everest Buisness Funding Describe debtor's property that is subject to a lien \$45,000.00 \$0.00

Creditor's Name

5 West 37th St., 2nd Fl.
New York, NY 10018

Creditor's mailing address

Describe the lien

Is the creditor an insider or related party?

- ☒ No
☐ Yes

Is anyone else liable on this claim?

- ☐ No
☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

- ☒ No
☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

- Check all that apply
☐ Contingent
☐ Unliquidated
☐ Disputed

2.4 Libertas Funding LLC Describe debtor's property that is subject to a lien \$8,000.00 \$0.00

Creditor's Name

382 Greenwich Ave., Suite 2
Greenwich, CT 06830

Creditor's mailing address

Describe the lien

Is the creditor an insider or related party?

- ☒ No
☐ Yes

Is anyone else liable on this claim?

- ☐ No
☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

- ☒ No
☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

- Check all that apply
☐ Contingent
☐ Unliquidated
☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any. \$218,000.00

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

Fill in this information to identify the case:Debtor name Deli King of Linden, LLCUnited States Bankruptcy Court for the: DISTRICT OF NEW JERSEY

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims?** (See 11 U.S.C. § 507).☐ No. Go to Part 2.☒ Yes. Go to line 2.**2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part.** If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

			Total claim	Priority amount
2.1	Priority creditor's name and mailing address Alex Laudisi 47 Dock Road Brick, NJ 08723 Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer Deposits Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,000.00	\$2,000.00
2.2	Priority creditor's name and mailing address Alyse & Ken Heilpern 4 Highland Dr Livingston, NJ 07039 Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer Deposits Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,500.00	\$2,500.00

Debtor	Deli King of Linden, LLC <small>Name</small>	Case number (if known) _____
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2.3	Priority creditor's name and mailing address Andrea and Ben Genek 15 Wendover Road East Windsor, NJ 08520	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,500.00	\$2,500.00
Date or dates debt was incurred		Basis for the claim: Customer Deposits		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.4	Priority creditor's name and mailing address Andrea Keate 117 Prospect Ave Bridgewater, NJ 08807	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$495.00	\$495.00
Date or dates debt was incurred		Basis for the claim: Customer Deposits		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.5	Priority creditor's name and mailing address Carolina Chappotin 821 Cleveland Ave Elizabeth, NJ 07208	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,446.40	\$1,446.40
Date or dates debt was incurred		Basis for the claim: Customer Deposits		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.6	Priority creditor's name and mailing address Corinne Smithen 310 Upper Mountain Ave Montclair, NJ 07043	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,500.00	\$2,500.00
Date or dates debt was incurred		Basis for the claim: Customer Deposits		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Deli King of Linden, LLC Name	Case number (if known)
2.7	Priority creditor's name and mailing address Dana and Jason Weinstein 34 Park Avenue Maplewood, NJ 07040 <hr/> Date or dates debt was incurred <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer Deposits <hr/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$2,500.00 \$2,500.00
2.8	Priority creditor's name and mailing address Deborah Kirschner 20-03 Radburn Road Fair Lawn, NJ 07410 <hr/> Date or dates debt was incurred <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer Deposits <hr/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$3,000.00 \$2,850.00
2.9	Priority creditor's name and mailing address Ilyse Shainbrown 2 Mountain Ridge Drive Livingston, NJ 07039 <hr/> Date or dates debt was incurred <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer Deposits <hr/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$2,500.00 \$2,500.00
2.10	Priority creditor's name and mailing address Internal Revenue Service Centralized Insolvency Operation PO Box 7346 Philadelphia, PA 19101-7346 <hr/> Date or dates debt was incurred <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: For Noticing & Precautionary Purposes <hr/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$0.00 \$0.00

Debtor	Deli King of Linden, LLC <small>Name</small>	Case number (if known) _____
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2.11	Priority creditor's name and mailing address Jason Eidlitz President, Hudson Cty Region Men's Club 301 Glenwood Drive Briarcliff Manor, NY 10510	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,500.00	\$1,500.00
	Date or dates debt was incurred	Basis for the claim: Customer Deposits		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.12	Priority creditor's name and mailing address Jesse & Stacey Schneider 31 McGuire Drive West Orange, NJ 07052	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$8,000.00	\$2,850.00
	Date or dates debt was incurred	Basis for the claim: Customer Deposits		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.13	Priority creditor's name and mailing address Joshua Ratner 333 Washington St., 4th Fl. Jersey City, NJ 07302	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$4,507.37	\$2,850.00
	Date or dates debt was incurred	Basis for the claim: Customer Deposits		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.14	Priority creditor's name and mailing address Karen Rosen 269 Thistle Lane Bedminster, NJ 07921	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$3,500.00	\$2,850.00
	Date or dates debt was incurred	Basis for the claim: Customer Deposits		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Deli King of Linden, LLC <small>Name</small>	Case number (if known) _____
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2.15	Priority creditor's name and mailing address Linda Lewis 2079 Pleasant Pkwy Union, NJ 07083	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$8,867.07	\$2,850.00
Date or dates debt was incurred		Basis for the claim: Customer Deposits		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.16	Priority creditor's name and mailing address Lisa Spirn 780 Norman Place Westfield, NJ 07090	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,000.00	\$2,000.00
Date or dates debt was incurred		Basis for the claim: Customer Deposits		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.17	Priority creditor's name and mailing address Michael Laitman 922 Carleton Road Westfield, NJ 07090	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,500.00	\$2,500.00
Date or dates debt was incurred		Basis for the claim: Customer Deposits		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.18	Priority creditor's name and mailing address Naomi Sternberg 27 Cherrywood Court River Vale, NJ 07675	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,500.00	\$2,500.00
Date or dates debt was incurred		Basis for the claim: Customer Deposits		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Deli King of Linden, LLC <small>Name</small>	Case number (if known) _____
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2.19	Priority creditor's name and mailing address Natalie Terdiman 2296 Oakham Ct Mahwah, NJ 07430	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,000.00	\$2,000.00
Date or dates debt was incurred		Basis for the claim: Customer Deposits		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.20	Priority creditor's name and mailing address Nomi Forman 1 Stirrup Lane Flemington, NJ 08822	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,000.00	\$2,000.00
Date or dates debt was incurred		Basis for the claim: Customer Deposits		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.21	Priority creditor's name and mailing address Pam Garretson 4 Blue Fern Lane Randolph, NJ 07869	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$3,000.00	\$2,850.00
Date or dates debt was incurred		Basis for the claim: Customer Deposits		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.22	Priority creditor's name and mailing address Rachel Katell 463 1st St., Apt. 3E Hoboken, NJ 07030	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,500.00	\$1,500.00
Date or dates debt was incurred		Basis for the claim: Customer Deposits		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Deli King of Linden, LLC <small>Name</small>	Case number (if known) _____
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2.23	Priority creditor's name and mailing address Rachel Steinberg 155 Richardson Road Robbinsville, NJ 08691	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,500.00	\$2,500.00
Date or dates debt was incurred		Basis for the claim: Customer Deposits		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.24	Priority creditor's name and mailing address Robby Bolcar 528 Washington Street Hoboken, NJ 07030	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
Date or dates debt was incurred		Basis for the claim: Customer Deposits		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.25	Priority creditor's name and mailing address Robyn Laveman 6 Cherry Hill Road Livingston, NJ 07039	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,850.00	\$2,850.00
Date or dates debt was incurred		Basis for the claim: Customer Deposits		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.26	Priority creditor's name and mailing address Sarah Ninivaggi 1620 Belmont Ave Seattle, WA 98122	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,500.00	\$2,500.00
Date or dates debt was incurred		Basis for the claim: Customer Deposits		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Deli King of Linden, LLC Name	Case number (if known)
2.27	Priority creditor's name and mailing address Seth Cohen 29 Angus Road Flemington, NJ 08822	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred	Basis for the claim: Customer Deposits
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		<div style="display: flex; justify-content: space-between;"> \$4,500.00 \$2,850.00 </div>
2.28	Priority creditor's name and mailing address State of New Jersey Sales & Use Tax CN 999 Trenton, NJ 08625-0999	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred	Basis for the claim: Sales Tax
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		<div style="display: flex; justify-content: space-between;"> \$9,358.60 \$9,358.60 </div>
2.29	Priority creditor's name and mailing address United Synagogue of Hoboken 115 Park Ave Hoboken, NJ 07030	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred	Basis for the claim: Customer Deposits
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		<div style="display: flex; justify-content: space-between;"> \$410.00 \$410.00 </div>
2.30	Priority creditor's name and mailing address Yael Miller 68 Athens Road Short Hills, NJ 07078	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred	Basis for the claim: Customer Deposits
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		<div style="display: flex; justify-content: space-between;"> \$3,000.00 \$2,850.00 </div>

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

Debtor	Deli King of Linden, LLC <small>Name</small>		Case number (if known)
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3.1	Nonpriority creditor's name and mailing address Acme Fish 30 Gem Street Brooklyn, NY 11222 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$19,778.94
3.2	Nonpriority creditor's name and mailing address ADPI 13 Smithfield Ct Basking Ridge, NJ 07920-2778 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>alarm</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,896.51
3.3	Nonpriority creditor's name and mailing address AFI Foodservice Distributors 1 Ikea Drive Elizabeth, NJ 07207 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,390.45
3.4	Nonpriority creditor's name and mailing address Beagle Linen LLC 6900 Roustein Ave., Unit 3 North Bergen, NJ 07047 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$300.00
3.5	Nonpriority creditor's name and mailing address Berlin Group, LLC 380 Fairfield Road Fairfield, NJ 07004 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>rent</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.6	Nonpriority creditor's name and mailing address Blue Tomatoes 131 Cedar St Ridgefield Park, NJ 07660 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$250.00
3.7	Nonpriority creditor's name and mailing address Bowco Laboratories 75 Freeman Street P.O. Box 1219 Woodbridge, NJ 07095-1219 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$799.92

Debtor	Deli King of Linden, LLC <small>Name</small>		Case number (if known)
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3.8	Nonpriority creditor's name and mailing address Capricorn Seafood PO Box 320198 Brooklyn, NY 11232 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$594.00
3.9	Nonpriority creditor's name and mailing address Citrin Cooperman, LLP 290 W. Mt. Pleasant Ave Livingston, NJ 07039 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Professional Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,400.00
3.10	Nonpriority creditor's name and mailing address City of Linden 301 Northwood Ave Linden, NJ 07036 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Garbage Removal</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$600.00
3.11	Nonpriority creditor's name and mailing address Congregation Agudath Israel 20 Academy Road Caldwell, NJ 07006 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$850.00
3.12	Nonpriority creditor's name and mailing address Diana Mrugal 149 Hawthorne Ct Rockaway, NJ 07866 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Professional Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,950.00
3.13	Nonpriority creditor's name and mailing address Ditto Copier 209 E. Elizabeth Ave Linden, NJ 07036 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$200.00
3.14	Nonpriority creditor's name and mailing address Driscoll Foods 174 Delawanna Ave Clifton, NJ 07014 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,657.33

Debtor	Deli King of Linden, LLC <small>Name</small>		Case number (if known)
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3.15	Nonpriority creditor's name and mailing address Elizabethtown Gas PO Box 3175 Union, NJ 07083 Date(s) debt was incurred ____ Last 4 digits of account number <u>3485;8469;7151;7151</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility Bills</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$261.64
3.16	Nonpriority creditor's name and mailing address Erica Lysick 506 Ainsworth St. Linden, NJ 07036 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>loan to business</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,500.00
3.17	Nonpriority creditor's name and mailing address Imperial Bag & Paper Co. 255 Route 1&9 Jersey City, NJ 07306 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,707.80
3.18	Nonpriority creditor's name and mailing address Intercounty Bakery Supply 1095 Long Island Ave Deer Park, NY 11729 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$100.00
3.19	Nonpriority creditor's name and mailing address JWMG 1501 Broadway New York, NY 10036 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,358.96
3.20	Nonpriority creditor's name and mailing address Linden City Municipal Court 301 N. Wood Ave. Linden, NJ 07036 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$120.00
3.21	Nonpriority creditor's name and mailing address Marketing Plus 114 Glenside Road New Providence, NJ 07974 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,625.00

Debtor	Deli King of Linden, LLC <small>Name</small>		Case number (if known)
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3.22	Nonpriority creditor's name and mailing address Mooney General Paper Co. 1451 Chestnut Avenue PO Box 3800 Hillside, NJ 07205 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,927.12
3.23	Nonpriority creditor's name and mailing address Nassau Foods 200 Albany Ave Freeport, NY 11520 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,130.22
3.24	Nonpriority creditor's name and mailing address New Jersey American Water P.O. Box 371476 Pittsburgh, PA 15250-7476 Date(s) debt was incurred ____ Last 4 digits of account number <u>5154;7592;0537;2774</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility Bills</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$312.86
3.25	Nonpriority creditor's name and mailing address PSE&G PO Box 14444 New Brunswick, NJ 08906 Date(s) debt was incurred ____ Last 4 digits of account number <u>9100;2601;7402;2206</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility Bills</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,203.00
3.26	Nonpriority creditor's name and mailing address RP Baking 840 Jersey Sheet Harrison, NJ 07029 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,643.28
3.27	Nonpriority creditor's name and mailing address S. Bertram, Inc. 3401 Tremley Point Road Linden, NJ 07036 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$154.40
3.28	Nonpriority creditor's name and mailing address Sa Lex Food 35 Oak Crescent Road Little Falls, NJ 07424 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$36,800.00

Debtor	Deli King of Linden, LLC <small>Name</small>		Case number (if known)
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3.29	Nonpriority creditor's name and mailing address Safer Laundry 61 Somerset Pl, Unit 2 Clifton, NJ 07012 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,852.05
3.30	Nonpriority creditor's name and mailing address State of NJ, Dept of Community Affairs Bureau of Fire Code Enforcement PO Box 809 Trenton, NJ 08625-0809 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>BFCE Registration Renewal Fee</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$323.00
3.31	Nonpriority creditor's name and mailing address Swiss Bakery 1711 East 2nd St Scotch Plains, NJ 07076 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,150.00
3.32	Nonpriority creditor's name and mailing address Temple Beth Rishon 585 Russell Ave Wyckoff, NJ 07481 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,700.00
3.33	Nonpriority creditor's name and mailing address Terry Bazydlo 713 Keep St Linden, NJ 07036 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>loan to business</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,500.00
3.34	Nonpriority creditor's name and mailing address Utica National Insurance Group Billing Dept., PO Box 6532 Utica, NY 13504-6532 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,052.00
3.35	Nonpriority creditor's name and mailing address Verizon PO Box 4833 Trenton, NJ 08650-4833 Date(s) debt was incurred ____ Last 4 digits of account number <u>0159</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility Bills</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

Debtor Deli King of Linden, LLC Case number (if known) _____

Name

3.36 Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: Check all that apply. \$6,619.94
 Westside Foods
 355 Food Center Dr., E Building
 Bronx, NY 10474
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
☐ Contingent
☐ Unliquidated
☐ Disputed
 Basis for the claim: Business Debt
 Is the claim subject to offset? ☒ No ☐ Yes

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1 Internal Revenue Service Special Procedures 955 So. Springfield Avenue Springfield, NJ 07081	Line <u>2.10</u> <input type="checkbox"/> Not listed. Explain _____	—

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ 86,434.44
5b. +	\$ 154,708.42
5c.	\$ 241,142.86

Fill in this information to identify the case:

Debtor name Deli King of Linden, LLC

United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B). *Property*

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest premises lease, expires 8/31/2030

State the term remaining 11 years

List the contract number of any government contract _____

Berlin Group, LLC
380 Fairfield Road
Fairfield, NJ 07004

Fill in this information to identify the case:

Debtor name Deli King of Linden, LLC

United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206H Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.

☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

Check all schedules that apply:

2.1 Edward Levy

15 Edie Drive
Marlboro, NJ 07746

Crown Funding
Group/Silver Line

☒ D 2.1
☐ E/F _____
☐ G _____

2.2 Edward Levy

15 Edie Drive
Marlboro, NJ 07746

Libertas Funding LLC

☒ D 2.4
☐ E/F _____
☐ G _____

2.3 Edward Levy

15 Edie Drive
Marlboro, NJ 07746

Everest Buisness
Funding

☒ D 2.3
☐ E/F _____
☐ G _____

Fill in this information to identify the case:

Debtor name Deli King of Linden, LLC

United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/16

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

☐ None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

For prior year:
From 1/01/2018 to 12/31/2018

Sources of revenue
Check all that apply

☒ Operating a business

☐ Other _____

Gross revenue
(before deductions and exclusions)

\$1,508,514.65

For year before that:
From 1/01/2017 to 12/31/2017

☒ Operating a business

☐ Other _____

\$1,548,208.00

For the fiscal year:
From 1/01/2016 to 12/31/2016

☒ Operating a business

☐ Other _____

\$1,604,674.00

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.

Description of sources of revenue

Gross revenue from each source
(before deductions and exclusions)

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☒ None.

Creditor's Name and Address

Dates

Total amount of value

Reasons for payment or transfer
Check all that apply

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed

Debtor Deli King of Linden, LLC

Case number (if known) _____

or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
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5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☐ None

Creditor's name and address	Describe of the Property	Date	Value of property
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6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☐ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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Part 3: Legal Actions or Assignments

7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
---------------------------	----------------	------------------------------------	----------------

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☐ None

Part 4: Certain Gifts and Charitable Contributions

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

☐ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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Part 5: Certain Losses

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

☐ None

Debtor Deli King of Linden, LLC

Case number (if known) _____

Description of the property lost and how the loss occurred**Amount of payments received for the loss**

If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.

List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).

Dates of loss**Value of property lost****Part 6: Certain Payments or Transfers****11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.**Who was paid or who received the transfer?
Address****If not money, describe any property transferred****Dates****Total amount or value**

11.1. WASSERMAN, JURISTA &
STOLZ, P.C.
110 Allen Road
Suite 304
Basking Ridge, NJ 07920

Attorney Fees and filing fee

12/28/18

\$2,500.00

Email or website address**Who made the payment, if not debtor?**

Barbara Levy

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None.**Name of trust or device****Describe any property transferred****Dates transfers were made****Total amount or value****13. Transfers not already listed on this statement**

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None.**Who received transfer?
Address****Description of property transferred or payments received or debts paid in exchange****Date transfer was made****Total amount or value****Part 7: Previous Locations****14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply**Address****Dates of occupancy
From-To****Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Debtor Deli King of Linden, LLC

Case number (if known) _____

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☒ No. Go to Part 9.
- ☐ Yes. Fill in the information below.

Facility name and address

Nature of the business operation, including type of services the debtor provides

If debtor provides meals and housing, number of patients in debtor's care

Part 9: Personally Identifiable Information**16. Does the debtor collect and retain personally identifiable information of customers?**

- ☒ No.
- ☐ Yes. State the nature of the information collected and retained.

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☒ No. Go to Part 10.
- ☐ Yes. Does the debtor serve as plan administrator?

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

- ☒ None

Financial Institution name and Address

Last 4 digits of account number

Type of account or instrument

Date account was closed, sold, moved, or transferred

Last balance before closing or transfer

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

- ☒ None

Depository institution name and address

Names of anyone with access to it
Address

Description of the contents

Do you still have it?

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

- ☐ None

Facility name and address

Names of anyone with access to it

Description of the contents

Do you still have it?

Extra Space Storage
1660 Oak Tree Road
Edison, NJ 08820

Eddie Levy

catering carts & equipment

☐ No
☒ Yes

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own

Debtor Deli King of Linden, LLC

Case number (if known) _____

21. Property held for another

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None

Part 12: Details About Environment Information

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No.
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
---------------------------	-------------------------------------	--------------------	----------------

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

Part 13: Details About the Debtor's Business or Connections to Any Business**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

☐ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.	Dates business existed EIN: From-To
-----------------------	-------------------------------------	--	--

25.1. Eddie Levy Siganture
Creations, Inc.
628 W. St. Georges Ave.
Linden, NJ 07036

Caterer

EIN: 22-3699173

From-To 1999-2019

Debtor Deli King of Linden, LLC

Case number (if known) _____

Business name address

Describe the nature of the business

Employer Identification number

Do not include Social Security number or ITIN.

Dates business existed

EIN: 46-5517000

From-To 2014-2019

25.2. NJB Caterers, LLC
622 W. St. Georges Ave
Linden, NJ 07036

Caterers

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

Name and address

Date of service

From-To

26a.1. Citrin Cooperman, LLP
290 W. Mt. Pleasant Ave
Livingston, NJ 07039

26a.2. Diana Mrugal
149 Hawthorne Ct
Rockaway, NJ 07866

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☒ None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None

Name and address

If any books of account and records are unavailable, explain why

26c.1. Citrin Cooperman, LLP
290 W. Mt. Pleasant Ave
Livingston, NJ 07039

26c.2. Diana Mrugal
149 Hawthorne Ct
Rockaway, NJ 07866

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☒ None

Name and address

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No

☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory

Date of inventory

The dollar amount and basis (cost, market, or other basis) of each inventory

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Debtor Deli King of Linden, LLC Case number (if known) _____

Name	Address	Position and nature of any interest	% of interest, if any
Edward Levy	15 Edie Dr. Marlboro, NJ 07746	Managing Member	100

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

- ☒ No
☐ Yes. Identify below.

30. **Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☐ No
☒ Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1 Edward Levy 15 Edie Drive Marlboro, NJ 07746	\$9,500.00	11/1/18-12/31/ 18	salary
Relationship to debtor Managing Member			

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
--------------------------------	--

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No
☐ Yes. Identify below.

Name of the pension fund	Employer Identification number of the parent corporation
--------------------------	--

Debtor Deli King of Linden, LLC

Case number (if known) _____

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on January 7, 2019

/s/ Edward Levy

Signature of individual signing on behalf of the debtor

Edward Levy

Printed name

Position or relationship to debtor Managing Member

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☒ No

☐ Yes

B2030 (Form 2030) (12/15)

**United States Bankruptcy Court
District of New Jersey**

In re Deli King of Linden, LLC

Debtor(s)

Case No.

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DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:
- | | | |
|---|----|-----------------|
| For legal services, I have agreed to accept | \$ | <u>2,165.00</u> |
| Prior to the filing of this statement I have received | \$ | <u>2,165.00</u> |
| Balance Due | \$ | <u>0.00</u> |
2. \$ 335.00 of the filing fee has been paid.
3. The source of the compensation paid to me was:
- ☐ Debtor ☒ Other (specify): Barbara Levy
4. The source of compensation to be paid to me is:
- ☒ Debtor ☐ Other (specify):
5. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
- ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.
6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
 - Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
 - [Other provisions as needed]
7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:
Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

January 7, 2019

Date

/s/ Leonard C. Walczyk

Leonard C. Walczyk

Signature of Attorney

WASSERMAN, JURISTA & STOLZ, P.C.

110 Allen Road

Suite 304

Basking Ridge, NJ 07920

(973) 467-2700 Fax: (973) 467-8126

attys@wjslaw.com

Name of law firm

**United States Bankruptcy Court
District of New Jersey**

In re Deli King of Linden, LLC

Debtor(s)

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VERIFICATION OF CREDITOR MATRIX

I, the Managing Member of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: January 7, 2019

/s/ Edward Levy

Edward Levy/Managing Member
Signer/Title

Acme Fish
30 Gem Street
Brooklyn, NY 11222

ADPI
13 Smithfield Ct
Basking Ridge, NJ 07920-2778

AFI Foodservice Distributors
1 Ikea Drive
Elizabeth, NJ 07207

Alex Laudisi
47 Dock Road
Brick, NJ 08723

Alyse & Ken Heilpern
4 Highland Dr
Livingston, NJ 07039

Andrea and Ben Genek
15 Wendover Road
East Windsor, NJ 08520

Andrea Keate
117 Prospect Ave
Bridgewater, NJ 08807

Beagle Linen LLC
6900 Roustein Ave., Unit 3
North Bergen, NJ 07047

Berlin Group, LLC
380 Fairfield Road
Fairfield, NJ 07004

Blue Tomatoes
131 Cedar St
Ridgefield Park, NJ 07660

Bowco Laboratories
75 Freeman Street
P.O. Box 1219
Woodbridge, NJ 07095-1219

Capricorn Seafood
PO Box 320198
Brooklyn, NY 11232

Carolina Chappotin
821 Cleveland Ave
Elizabeth, NJ 07208

Citrin Cooperman, LLP
290 W. Mt. Pleasant Ave
Livingston, NJ 07039

City of Linden
301 Northwood Ave
Linden, NJ 07036

Congregation Agudath Israel
20 Academy Road
Caldwell, NJ 07006

Corinne Smithen
310 Upper Mountain Ave
Montclair, NJ 07043

Crown Funding Group/Silver Line
253 36th St., Suite B317
Brooklyn, NY 11232

CT Corporation System, as Representative
330 N. Brand Blvd., Suite 700
Attn: SPRS
Glendale, CA 91203

Dana and Jason Weinstein
34 Park Avenue
Maplewood, NJ 07040

Deborah Kirschner
20-03 Radburn Road
Fair Lawn, NJ 07410

Diana Mrugal
149 Hawthorne Ct
Rockaway, NJ 07866

Ditto Copier
209 E. Elizabeth Ave
Linden, NJ 07036

Driscoll Foods
174 Delawanna Ave
Clifton, NJ 07014

Edward Levy
15 Edie Drive
Marlboro, NJ 07746

Elizabethtown Gas
PO Box 3175
Union, NJ 07083

Erica Lysick
506 Ainsworth St.
Linden, NJ 07036

Everest Buisness Funding
5 West 37th St., 2nd Fl.
New York, NY 10018

Ilyse Shainbrown
2 Mountain Ridge Drive
Livingston, NJ 07039

Imperial Bag & Paper Co.
255 Route 1&9
Jersey City, NJ 07306

Intercounty Bakery Supply
1095 Long Island Ave
Deer Park, NY 11729

Internal Revenue Service
Centralized Insolvency Operation
PO Box 7346
Philadelphia, PA 19101-7346

Internal Revenue Service
Special Procedures
955 So. Springfield Avenue
Springfield, NJ 07081

Jason Eidlitz
President, Hudson Cty Region Men's Club
301 Glenwood Drive
Briarcliff Manor, NY 10510

Jesse & Stacey Schneider
31 McGuire Drive
West Orange, NJ 07052

Joshua Ratner
333 Washington St., 4th Fl.
Jersey City, NJ 07302

JWMG
1501 Broadway
New York, NY 10036

Karen Rosen
269 Thistle Lane
Bedminster, NJ 07921

Libertas Funding LLC
382 Greenwich Ave., Suite 2
Greenwich, CT 06830

Linda Lewis
2079 Pleasant Pkwy
Union, NJ 07083

Linden City Municipal Court
301 N. Wood Ave.
Linden, NJ 07036

Lisa Spirn
780 Norman Place
Westfield, NJ 07090

Marketing Plus
114 Glenside Road
New Providence, NJ 07974

Michael Laitman
922 Carleton Road
Westfield, NJ 07090

Mooney General Paper Co.
1451 Chestnut Avenue
PO Box 3800
Hillside, NJ 07205

Naomi Sternberg
27 Cherrywood Court
River Vale, NJ 07675

Nassau Foods
200 Albany Ave
Freeport, NY 11520

Natalie Terdiman
2296 Oakham Ct
Mahwah, NJ 07430

New Jersey American Water
P.O. Box 371476
Pittsburgh, PA 15250-7476

Nomi Forman
1 Stirrup Lane
Flemington, NJ 08822

Pam Garretson
4 Blue Fern Lane
Randolph, NJ 07869

PSE&G
PO Box 14444
New Brunswick, NJ 08906

Rachel Katell
463 1st St., Apt. 3E
Hoboken, NJ 07030

Rachel Steinberg
155 Richardson Road
Robbinsville, NJ 08691

Robby Bolcar
528 Washington Street
Hoboken, NJ 07030

Robyn Laveman
6 Cherry Hill Road
Livingston, NJ 07039

RP Baking
840 Jersey Sheet
Harrison, NJ 07029

S. Bertram, Inc.
3401 Tremley Point Road
Linden, NJ 07036

Sa Lex Food
35 Oak Crescent Road
Little Falls, NJ 07424

Safer Laundry
61 Someset Pl, Unit 2
Clifton, NJ 07012

Sarah Ninivaggi
1620 Belmont Ave
Seattle, WA 98122

Seth Cohen
29 Angus Road
Flemington, NJ 08822

State of New Jersey
Sales & Use Tax
CN 999
Trenton, NJ 08625-0999

State of NJ, Dept of Community Affairs
Bureau of Fire Code Enforcement
PO Box 809
Trenton, NJ 08625-0809

Swiss Bakery
1711 East 2nd St
Scotch Plains, NJ 07076

Temple Beth Rishon
585 Russell Ave
Wyckoff, NJ 07481

Terry Bazydlo
713 Keep St
Linden, NJ 07036

United Synagogue of Hoboken
115 Park Ave
Hoboken, NJ 07030

Utica National Insurance Group
Billing Dept., PO Box 6532
Utica, NY 13504-6532

Verizon
PO Box 4833
Trenton, NJ 08650-4833

Westside Foods
355 Food Center Dr., E Building
Bronx, NY 10474

Yael Miller
68 Athens Road
Short Hills, NJ 07078

**United States Bankruptcy Court
District of New Jersey**

In re Deli King of Linden, LLC

Debtor(s)

Case No.

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CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for Deli King of Linden, LLC in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

☒ None [*Check if applicable*]

January 7, 2019
Date

/s/ Leonard C. Walczyk

Leonard C. Walczyk

Signature of Attorney or Litigant

Counsel for Deli King of Linden, LLC

WASSERMAN, JURISTA & STOLZ, P.C.

110 Allen Road

Suite 304

Basking Ridge, NJ 07920

(973) 467-2700 Fax:(973) 467-8126

attys@wjslaw.com